predictor factor is indicative of said high risk of said individual utilizing said healthcare services at said predetermined level within said prospective time span; and

assigning, based upon said information, a second dichotomous value to said separate value for said first predictive factor if said determining step determines that said first predictor factor is not indicative of said high risk of said individual utilizing said healthcare services at said predetermined level within said prospective time span.

Please add claims 21–27.

21.   (New) The method of claim 1, further comprising the step of:

determining whether each piece of collected information is by itself indicative of a high risk level of said individual utilizing healthcare services at a predetermined level.

22.   (New) The method of claim 1, further comprising the step of:

defining a first reference date in the future; wherein the generating step includes generating said separate values assigned to said predetermined set of predictive factors, a risk level of said individual utilizing healthcare services at a predetermined level in the time period between a present date and the first reference date.

23.   (New) The method of claim 1, wherein each separate value assigned to each predictive factor is a value indicative of a risk of said individual utilizing healthcare services.

24.   (New) The system of claim 11, wherein the separate value assigned by the instructions is indicative of a risk of said individual utilizing healthcare services.

25.   (New) The system of claim 11, wherein the risk level generated is a risk level of said individual utilizing healthcare services at a predetermined level with a prospective time span between a present date and a first reference date.

26.   (New) The system of claim 16, wherein each separate value assigned by the instructions is indicative of a risk of said individual utilizing healthcare services.

27.   (New) The system of claim 16, wherein the risk level generated is a risk level of said individual utilizing healthcare services at a predetermined level with a prospective time span between a present date and a first reference date.